## TOWN OF CAMP VERDE **USER REQUEST**

Class \_\_\_\_\_

Town of Camp Verde Parks & Recreation Department

395 S. Main Street Camp Verde, AZ 86322		Ph: 928-567-0535 Fax: 928-567-1540	
Facility Requested:  Room 204 Room 206 & 20	' □ Kitchen □ Gym □ Gaze	bo 🗆 Ramada	☐ Conference
☐ Community Center Field ☐ B	tler Baseball 🔲 Butler Picnic 🗆	Butler Soccer I	Field
ame of Organization:			
erson Responsible for activity:			
lailing Address:	City	State	 Zip
			·
hone: home	wk	_ cell	
-mail:			
Date(s) of Use:	Time of Event:		
Date & Time Requested for Set-Up:			
Description of Activity:			
Estimated number of Attendees:	Total Hours of Us	se	
Will you implement a charge for the ever Will food be served? Will you be setting up equipment, decora Please give a brief description to any "Ye	ions, etc.?	Yes □ Yes □ Yes □	No □ No □
Rental Fee:	Deposit:		·
Rental Fee \$	Cleaning Deposit	\$	
Floor Preparation \$ Light Fee \$	Key Deposit	\$	
Electricity \$	' '	т	<del></del>
Total Due \$	Total Deposits Due	<b>&gt;</b>	
	P & R staff must insp	ect room(s) befo	ore deposit is returned
Receipt Number:	Receipt number: _		
M/o	its officers or	mployoos and m	ombore shall through
We	arty or agent, indemnify, hold harm	nployees and M	embers shall through

facilities, fields and recreational facilities. Applicants Signature Date Approval Signature Date

judgment of every name and description against the Town of Camp Verde as a result of loss, damage or injury to person or property by reason of any action or omission by the Town of Camp Verde, its agents or employees for the use of Town